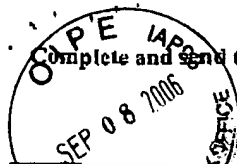


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

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Commissioner for Patents
P.O. Box 1450
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7590

08/25/2006

JOHN E BECK
XEROX CORPORATION
XEROX SQUARE 20A
ROCHESTER, NY 14644

09/11/2006 RNEBRAH1 00000153 240025 09408873

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MICHELLE A BEACH (Depositor's name)
MICHELLE A BEACH (Signature)
September 8, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/408,873	09/29/1999	MAURITIUS SEEGER	D/99487	4555

TITLE OF INVENTION: MOSAICING IMAGES WITH AN OFFSET LENS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	11/27/06

EXAMINER	ART UNIT	CLASS-SUBCLASS
MISLEH, JUSTIN P	2622	348-219000

Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

XEROX CORPORATION
STAMFORD, CT

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Thomas Zell

Date 9/8/06

Typed or printed name Thomas Zell

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